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the CHILD



A NEW LOOK AT CHILD HEALTH

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IN speaking to you here at the National Health Assembly, about the "new look" in child health, I am very happy indeed to be given the opportunity. I appreciate this greatly as a gracious gesture to the new, very young—in fact, not yet quite born—World Health Organization. However, this new look, not so well known actually, predates the other well-known new look which is in the process again of changing the surface contours of the female species.

This new look that I am going to tell you about began something over 2 years ago at a technical preparatory meeting in Paris held to draft the constitution of an international health organization. The conditions of the world were changing rapidly at that time. This was recognized by these people who met together.

At an international health conference in June and July of 1941, 61—and since then 3 others, making a total of 64—nations signed the constitution of the World Health Organization. Incorporated in this constitution is the new look in child health.

Health gets new meaning

The beginning of that new look is shown in the first statement in the constitution, which is a definition of health. Never again will the makers of dictionaries have to worry about the meaning of this particular word. The exact meaning is now agreed on officially by 64 nations. Perhaps no other word has been so successfully and completely defined as this word "health." I would remind you that any change in this definition will require a two-thirds vote of the nations. So we may with confidence say there is one word in the English-American language whose proper use and whose proper definition we can be quite sure of.

Health is defined as a state of complete physical, mental, and social well-

being, not merely the absence of disease or infirmity.

This is the new look. This is a recognition by 64 nations that the necessary equipment of the individual has changed, that never again can we regard people who merely have healthy minds in sound bodies or who enjoy only physical health as being healthy. Never again can such people be considered truly healthy.

The requirements for health now go beyond the old definitions. It is recognized that a necessary part of the equipment of every human being is social health, the ability to live in harmony with other people of other kinds, with other traditions, with other religions, and with other social systems, throughout the world.

A little later in the constitution of the World Health Organization there is another statement which I might read you. "Healthy development of the child is of basic importance. The ability to live harmoniously in a changing total environment is essential to such development."

That is a statement, again, which was signed by 64 nations. There is no doubt whatever as to its meaning. It means that we, all of us, need to take a new look at the way our children are developing. Unless we are very careful, very careful indeed, and very conscientious, there is still great danger that our children may turn out to be same kinds of people we are. There could be nothing more disastrous than that. We are the kinds of people who have got the world into the mess it is in now. We are the kinds of people, as all our ancestors have been, who fight each other enthusiastically every 15 or 20 years and have done so throughout all history of the human race. Until quite recently that fact was of relatively little importance. When people used to fight each other,

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ordinarily only a few thousand or a few hundred thousand or occasionally a few million people were killed. Times have changed. The efficiency of killing now available to the human being has changed the very conditions of survival in the world. The new and efficient methods of killing—the atomic bomb, and far beyond that the horrible potentialities of biological warfare—have produced a world situation where it becomes quite clear that our previous methods of competitive survival have become utterly obsolete. It is quite clear now that warfare and suicide are synonymous terms.

Children need new patterns

It is quite clear that we must learn to live in peace with each other throughout the world. If we do not do so, there is little prospect that our children will finish their lives according to the statistical probabilities on which the life-insurance companies depend. In fact, there is little prospect that any but a few of our population, a very small minority, will survive the next 20 or 25 years if we go on being the kinds of people we have been, and if we allow our children to reproduce our patterns.

It is well worth our while to look at the way we were brought up, the way we were developed, and hope to find out what is wrong with us so that we may prevent our children from assuming those same patterns.

There are certain things that are clear now about the development of children. It is clear that there are enormous numbers of adults in the world who lack security, who have lacked security from infancy, and because of that lack of security are available as followers specifically of those people who have excessive needs for power, who have neurotic needs for leadership, who have vast needs for individual personal importance and prestige. There will always be such people. We can take it for granted that there will be a continual crop of neurotics in the world for quite a long time yet. They are the potential leaders in strange and weird directions, but it is time to begin to do something about the masses of people who up until now have been available as followers of such people.

It becomes clear that the first necessity is to produce a degree of security

in small children that will make it unnecessary for them to search for security in peculiar and unworkable ways when they become adults. Some healthy conditions of security are rather well known. I think it is clear to all of us that the first and primary necessity for finding security on the part of the human being is complete security in small infancy. Complete security in infancy does not depend even on adequate food supply or shelter. There is only one thing on which it does depend to the most important degree: unquestionable,

son, a person whom he admires and loves. And so the responsibility of parents and teachers of young children is to show children in their own persons and in their own habitual patterns the kind of citizenship that will make it possible for the human race to survive in the future. That has not been done widely in the past.

A child develops in time and space

If the child has the opportunity, he will begin very early a progressive development which will continue through-

areas that are not within his immediate purview. He learns there are other people in his environment. He learns about other members of his family. He learns to adjust to those other members and to demand, to a degree, that they adjust to him.

If he is developing soundly, he very soon develops a relationship, or potential relationship, to other members of his community, which at first is very small—only his own family. But when he is very young he should be, if developing soundly, developing a responsibility toward other members of his family. I remind you again that he cannot be beaten into doing this. There is only one way he can learn it soundly, by growing into the pattern he sees about him.

If he continues sound development, he will assume the same pattern in regard to the community, the local community. He will find his father, mother, relatives, and elders concerned about the conditions in the community. The persons taking responsibility in this field will be people who are admired by his parents, by his elders. He will learn that this is an admirable pattern, this pattern of taking responsibility in things that are needed for the community.

A little later he may develop, if he is soundly developing, a relationship with wider horizons, his State, his province. Eventually, in a few cases (but I think we must face the fact that it is still in only a relatively few cases) we do have people who reach a status of national citizenship. I will remind you, in case you doubt what I am saying, that the status of national citizenship requires an equal degree of loyalty to all the members of the national community, all the members, irrespective of race, religion, or color, or any other group characteristic. Only such people as have attained such status can be regarded as national citizens in the full sense of the term.

Up until quite recently, national citizenship was enough. We have gotten by with national citizenship up until now, but now the world has changed. No longer is national citizenship alone—and that in only a minority of the people—sufficient to preserve the human race in the future.



Complete security for a small child depends on our unquestionable, all-embracing, obvious love.

all-embracing, obvious love, and nothing else will give a small child that degree of security on which he can build his citizenship, from which he can afford to adventure into a perilous world. If he does not get it then, he will spend the rest of his life searching for it, and searching for it in strange places where it is not to be found. This, then, is the first reckoning.

Second, the child must have the opportunity of growing into a pattern, but not by precept. There is no use whatever in lecturing children about their responsibilities and where they must go. There is only one way in which a child grows into a pattern, and that is by identifying himself with an elder per-

son, a person whom he admires and loves. And so the responsibility of parents and teachers of young children is to show children in their own persons and in their own habitual patterns the kind of citizenship that will make it possible for the human race to survive in the future. That has not been done widely in the past.

out his life, but this progressive development may be stopped at any stage by a variety of circumstances. The most common is a lack of pattern close to him which will show him the potentialities in the future. If a child is developing normally, he will develop mostly in space and time. He will find himself first as a person when he is very small. At first he has only feelings which are unrelated to time, space, or person, but gradually he learns that he is a person experiencing. He learns something of space. He learns that there are other places beyond his reach. He learns to affect his immediate environment and then his further environment. He learns there are other

For world citizenship

There is an acute and immediate need for world citizens. There is an absolute necessity in the future for people who will assume responsibility for the welfare of the human race, everywhere, not just locally, not just nationally, but for the whole human race.

It is this pattern, if shown to children, toward which they may develop and which it is to be hoped that enough of them may approach soon enough, that is the only hope of survival of the human race for another generation or so.

As the child develops in space he is also developing in the field of time. At first, in infancy, there is no past and no future. There is only now. Soon the child learns a little of the past and a little of the future. He projects himself into tomorrow and the next day. By the time he is 4 or 5 years old he should be able to give up something today to get something better tomorrow or next week. By the time he has reached his early teens, he should be functioning a considerable period ahead of the present. By the time he is in the middle or late teens he should be functioning at least 10 years ahead of the present. He should have a picture of himself in relation to the community. He should have assumed responsibility for what he will be like and what his relationship will be to the community at least 10 years ahead of himself. By the time a person has reached maturity, or that stage of maturity that is appropriate to this degree of evolution of the human race, he should be thinking in terms of at least 2 or 3 generations.

Again, in the past it did not matter if time did not develop much beyond the here-and-now stage. In the future it matters, and it matters enormously. Whatever we do, whatever we say, whatever we expect from our children, whatever we say that may be reported in other countries (and things we say *are* reported in other countries); all people who are truly mature, appropriately mature, to this generation, must consider the effects on the future, not just this year or next, but the far future.

These, for people brought up the way we have been brought up, are difficult concepts. These are extraordinarily difficult goals for us, but we can make them very much easier indeed for our children if we start soon enough, if we

catch them young and do not spoil them as most of us have been spoiled.

Particularly, it is highly desirable that the next generation should not be able to fool themselves as casually and as unconsciously and as easily as we have done. They should not be the same kinds of people who can avoid unpleasant things by not looking at them. They should not be brought up, as many of us have been brought up, on a perfectly ghastly symbol that I am afraid many of you have seen in quite civilized homes. The symbol I refer to is three

speaking about it, that has allowed wars to arrive in the past, always to our astonishment, because we did not take responsibility soon enough.

There is a field in which responsibility needs to be shown to children, which in any country, including this one, is rather a delicate matter. It has to do with our social responsibility in relation to social organization. It has to do with our voting, our electing people to positions of responsibility in our governments in every country. Our selection of these people by how we vote



Every child grows into a pattern by identifying himself with a person he admires and loves.

little monkeys, one with his hands over his ears, who will hear nothing distressing, who will hear no evil; another with his hands over his eyes, who will see no evil; another with his hands over his mouth preventing his saying anything about it.

Change symbolism for children

This is the epitome of the laissez-faire attitude most of us were taught. If there is evil we need to see it. Wherever evil lies we need to talk about it. We need to hear about it, and we need to take our responsibility about doing something about it. In this field we need to change our symbolism for our children. It is this teaching of avoiding evil, avoiding seeing or hearing or

puts our lives and the lives of our children in their hands; our human relations as between nations and as between groups of peoples throughout the world are in the hands of the people whom we elect to offices under our governments.

It is very important indeed in the future—it has not been important in the past, or relatively unimportant in the past—that we elect people who are capable of assuming that responsibility and whom we can trust not to allow all our children to die during the next generation.

The requirements are heavy. The responsibility on legislators and on people in government is immense. It is time we began to assume our responsibility in that field and to recognize that hu-

man relations throughout the world are the important matters, not our little affairs at home, not our own little comforts or our local peace, not our own ability to make a little more money or to have a bigger and better car, but the feelings of millions of people in other parts of the world about us. These are the important things. These are the things that are going to keep us alive or kill us off within the next few years.

Our upbringing has made it very difficult for us to see these matters. It is important that our children should not be so handicapped. The biggest business in the world, and the most important business in the world, the business which outweighs all other values in the world, is the business of rearing children. This has the greatest importance. The world will be what the children of the next generation make it. It is not just a question of these children being able to live in whatever the world may be like 25 or 30 years from now, but it is a question of what kind of world our children will make, because the time has come when it is essential that man should learn no longer to drift but to take charge of his own destiny as we have not been able to do in our own generation. In order to do this, our children must be freed of many of our taboos, many of our anxieties, and many of our unfounded fears.

They must be free to think in all directions, irrespective of the peculiar ideas of their parents. We must face the fact that we have many peculiarities.

One sees horrible things happen in relation to children now. One sees evidence of parents exposing their superstitions to children who are developing. One sees grown-up people avoiding the number 13 or something of that kind. We see them teaching children that there is no relationship between cause and effect, that the world is full of magics, that there is no possibility of controlling things, except through rituals or weird magics of some kind or another. Our children in the future, if they are to survive at all, must be realists. They must be able to face reality. They must not have available to them the escapes we have had into a fantastic world that does not exist. They must be able to face the reality of their own natures, of their own aggressive drive.

They must learn how to cope with these as we have not coped with them effectively.

It is in this mental-health field, to which the 64 nations call attention, and the result in the allied field of social health, that we find the things that need to be done most particularly in the future. For instance, there is no problem in the world in relation to, shall we say, malaria, tuberculosis, venereal-disease control, smallpox, diphtheria, and very many other diseases, except a mental and social problem. All these diseases can be eradicated from the world very quickly if and when we have mental and social

health-conscious people. Until we have that, it cannot be done.

I finish by reminding you of our personal responsibility in this regard. This is not a matter for us all in the area of making speeches and writing about it. It is a matter for simple words simply put. It is a matter for personal and individual responsibility in relation to our own children and the children in our immediate vicinity. This responsibility is for every person who is sufficiently emotionally and socially developed to take it up, and it is a responsibility which cannot be avoided.

Reprints available in about 5 weeks.

Federal Agencies Join Hands to Work for Children and Youth

At the suggestion of President Truman, Federal Security Administrator Oscar R. Ewing has invited branches of the Federal Government concerned with the well-being of children and youth to accept membership on an Interdepartmental Committee on Children and Youth.

Among the Federal agencies invited to participate in this Government-wide advisory committee are the Departments of Agriculture, Interior, Justice, and Labor; the Administrative Office of the United States Courts; and the Housing Home Finance Agency. All these agencies have important responsibilities, which, directly or indirectly, affect the well-being of children and youth.

"It is my hope," the President wrote Mr. Ewing, "that the committee will aid in developing appropriate working relationships among Federal agencies concerned and between the Federal Government and State commissions or committees for children and youth, which exist in many States. Furthermore, the committee should assist the various agencies in meeting their responsibilities in this field to the best advantage of the young people of the Nation. It should, of course, recommend methods by which the fulfillment of these responsibilities can be extended and improved."

In releasing the President's letter Mr. Ewing said in part:

"I welcome particularly the importance the President places on the assistance that this committee can give to the Children's Bureau in cooperating with the National Commission on Children and Youth in planning for a midcentury White House Conference on Children. While that event is 2 years ahead of us, a great deal of preparation for it must start now, if it is to be, as it should be, a significant milepost in the people's march toward greater opportunity for our youngsters."

Public Health Service Issues Mental Health Pamphlets

"For Mental Health" is the first in a new series on mental health prepared by the U. S. Public Health Service. It is designed to inform the public about the national mental-health program under the recent National Mental Health Act.

Single copies of the pamphlet may be obtained free of charge by writing to the Chief, Public Inquiries Section, U. S. Public Health Service, Federal Security Agency, Washington 25, D. C. Copies may be purchased in quantity from the Superintendent of Documents, Government Printing Office, Washington 25, D. C., at 5 cents per single copy or \$1.25 per hundred.

Two additional pamphlets, "Training for Mental Health Under the National Mental Health Act," and "The National Mental Health Act and Your Community," are now in preparation.



A TWO-YEAR JOB FOR STATES AND COMMUNITIES

IMMEDIATE, intensive action in all fields pertaining to the welfare of children and youth is urgently needed. In view of this need, the National Commission on Children and Youth, at its January 1948 meeting, recommended that a Midcentury White House Conference on Children and Youth be held in 1950 and that preparatory work, including State and local action, begin at once.

The commission recommended that in each State and Territory the leadership in preparatory work be taken by a group that includes representatives of public and private agencies and citizens' organizations. It suggested that each State committee agree on objectives possible of attainment, in whole or in part, through State-wide effort, before the 1950 conference.

The theme proposed by the commission for the midcentury conference is "The Child in His Family and Community."

As an outgrowth of these recommendations, the Conference on State Planning for Children and Youth met at Washington March 30-April 1, 1948, to initiate State and community action in preparation for the 1950 conference.

The planning conference recognizes

that the projected 1950 White House Conference, as proposed by the National Commission, has been established as one geared to action 2 years in advance, a conference springing from grass-roots interest and activities—roots that reach to every State, county, and community, wherever children live.

The commission recognized that the preparatory program will be more fruitful if local communities participate in preconference activities through local counterparts of State committees, with joint planning and action, and sharing of experience.

It has the reinforcement of previous White House Conferences over a period of 40 years, and of the greatly intensified activity in all areas of child services during the depression years and recent war and postwar years.

It also derives strength and resources from the work of the National Commission on Children and Youth and the State youth commissions and committees and the State children's code

Preliminary statement (condensed) of suggestions for State and local action toward a 1950 White House Conference on Children and Youth, developed at the Conference on State Planning for Children and Youth, held at Washington, March 30-April 1, 1948.

commissions; as well as from such important conferences related to the welfare of children as the White House Conference on Rural Education (1944), the National Conference on Prevention and Control of Juvenile Delinquency (1946), the National Health Assembly (1948), and the National Conference on Family Life (1948).

Planning for a White House Conference begins against the backdrop of a world in confusion, but searching for ways to reestablish equilibrium. The cause of the world confusion is that people are in confusion.

In achieving essential goals, a total job is to be done; total in its inclusion of all citizens, the organized as well as the unorganized; total in its inclusion of all children—to the ultimate child—in our 45-million child population under 18 years of age.

The beginning of any effective planning is to discover and etch into public consciousness the gaps and gains up to this point.

The well-being of children and youth must be considered, not in mere segments of need, but within the complex of many interweaving social conditions as they affect total development and security. Problems which stem from these conditions are many. To enumerate but a few, there are those relating to economic security of the family; good housing; strengthening the values of home and family life; equal and full opportunities in education for all; improving and expanding the established health and medical services; protection of working children and youth; prevention and treatment of delinquency; and facilities for care of the handicapped.

The National Commission, in its proposals for a 1950 White House Conference, recommended a comprehensive program of research to be developed by a national committee, with cooperation from the States.

The National Commission urges that all at work for children press ahead on already undertaken State efforts and initiate new efforts, so that in 1950 those who meet at the White House Conference not only will take into account what is needed but will have a report on what has been done in the intervening period to improve services for children and youth, and thus have a basis for future action.

In carrying out this assignment by the National Commission the State planning conference demonstrated the way in which representatives of many fields of training can plan together for the good of children. Each person represented a special area of interest, but these interests were fused in a common effort. The work reported upon has come out of community planning, of groups working together, representatives of Federal and State and local agencies, in cooperation with national private agencies and citizen organizations, representing a wide cross section of affiliation.

The programs of action that will be developed in the next 2 years will vary in each State and community in accordance with particular needs and resources. The conference believes that all aspects of planning should be directed, however, toward the single objective of the total well-being of the child.

The Conference on State Planning for Children and Youth accepted the challenge of the National Commission on Children and Youth that work begin now, primarily in States and local communities, in preparation for a midcentury White House Conference.

The conference was organized around methods of achieving action to bring about objectives for the well-being of children.

Discussions by the delegates centered upon: Organization of States and local planning bodies; fact finding; standards and guides needed for State and local action; legislation to achieve action; citizen participation to achieve action: (a) Adult participation, (b) youth participation.

All the group discussions emerged with a few common recommendations, and general agreement upon certain principles of action:

Recommendation that in each State there be established a State-wide council, committee, or commission, representing all agencies and organizations, voluntary and official, which serve children, and also for local planning councils or committees to carry out the same general purposes.

Variations in States and communities in physical, political, economic, and cultural developments require that planning bodies be flexible, to serve each sit-

uation. General principles can serve as guides to States and communities, but no one pattern can be set. Purposes of planning should be broad: (1) To reach the needs of all children and youth, and (2) to relate programs and services for children and youth to community responsibility for families and for all people.

The principle of the widest possible citizen participation is endorsed—of partnership between the professional and the volunteer.

The importance of youth participation in community life generally is stressed, and in those fields closely related to activities specially allied to their own interests and welfare.

A first step in sound action by either State or community planning groups is fact finding. A look back to the achievements of the past, with appraisal of what has been done in the various fields of services to children is essential to guide future developments and programs.

Organization of State and local planning bodies

The National Commission on Children and Youth, in proposing that work in preparation for a 1950 White House Conference on Children and Youth begin at once, recommended that planning groups be established in every State and Territory, where such body does not already exist, to work in the interest of children and youth. Such a planning group, whether established specifically for the purposes of strengthening and developing services to and for children, or as an integral part of a general planning body, provides opportunity for citizens to put aims into action. The conference on State planning accepts this recommendation.

The group becomes the tool to get things done.

What the things to be done are grow out of widespread opinion and choice, if the planning group is truly representative and inclusive. Such a group should be, in short, a people's council, never static, but flexible, capable of growth and expansion as the occasion demands, sensitive to changing situations that call for adaptations of organization and goals.

Planning bodies, organized on a broad enough basis to reach the needs of all children and youth, should, within

the framework of their wide purposes, have specific objectives related to existing needs and development. Both organization and program should be developed with recognition of the fact that the needs of children and youth are part of the needs of all citizens and cannot be planned for apart from general planning and more widespread action to achieve total well-being.

In initiating planning bodies or making changes in organization in existing planning bodies, States should consider the fact that patterns of organization may be developed under different types of auspices. The three most common auspices are: (1) Legislative authority; (2) Governor's appointment without legislative action; (3) voluntary sponsorship.

Whatever the basis of organization, the composition of the planning body should include established organizations and individuals, assuring representation of all interests and groups. The size of the planning group necessarily will be large in order to include all persons concerned with children and youth in the State and in local communities. Not only wide representation, but continuity of participation is important, with provision for awakening latent interest and extending membership as may be desirable.

The internal organization of each planning group should provide for the most effective use of its membership in achieving the broad purposes and specific objectives. Consideration should be given to executive direction both through a director and an executive committee, with active use of all members through working committees and general meetings of the planning body.

The functions of the planning body will be to carry out the broad purposes and specific objectives. In general, functions may include: (1) Research and fact finding; (2) assessment of facts; (3) clearinghouse for information; (4) interpretation of over-all needs of children and youth and of specific services; (5) programs or action necessary to meet those needs; (6) planning for and promoting legislation; (7) participating in National planning groups and programs for children and youth such as the White House Conference of 1950; (8) coordinating interests, services, and programs

for the well-being of children and youth.

Specific programs or methods logically are left to individual planning groups to be developed. It is recommended, however, that any program should be planned on a long-time as well as an immediate basis. An appraisal of the effectiveness of the work of a planning body must take into account the slowness of progress in bringing about more effective use of, or extension of, existing resources for children and youth, and establishment of new programs.

Financial support is essential to maintain the work of any planning group. Methods of securing funds are varied, such as legislative appropriations, grants from foundations or organized financing agencies, and contributions.

In planning and organizing for the well-being of children and youth, techniques and methods will vary greatly, but there are a few basic principles and aims essential to sound planning:

1. Unity of purpose and correlated objectives.
2. Widest possible participation, including governmental agencies, civic groups, youth groups, church, labor, legislative representation.
3. Working through established organizations but leaving the door open to individually interested citizens.
4. Provision for wakening latent interest.
5. Keeping in mind in all planning the relation of the child to the family, and that the cornerstone of the well-being of children and youth is wholesome family life.

It is recommended that:

One of the following methods be used in every State and Territory for commissions on children and youth: Sponsored by State-wide voluntary organizations; appointment by Governor; passage of enabling legislation to set up organization.

State and local planning bodies adopt the suggestions of the National Commission on Children and Youth, on action by States and communities, as follows:

1. Review and evaluate resources under public and private auspices available within the State or Nation that affect families with children, noting

gaps in extent and content of services.

2. Secure and make use of information from Federal and other national professional and lay agencies and evaluation of new programs, organizations, techniques, and methods of operation that can be used in developing activities and programs.

3. Agree on some specific objectives they want to achieve for the children in their own communities and States.

4. Work toward the achievement of these objectives against the deadline of the 1950 White House Conference.

All Federal agencies with any interest in children and youth coordinate their planning activities with particular reference to field consultation with State and local committees, and as nearly as possible also clear the information and suggestions which flow from Federal to State and local agencies. This coordinated planning should begin now and be as widely inclusive as possible. Federal and national agencies should encourage the formation of State and local planning bodies and should assist them in their programs.

Fact finding

Two kinds of fact gathering should be considered in connection with the 1950 White House Conference: Scientific, expert research and the collection of community data by citizen groups. Both are important in the over-all situation. The latter type of information, usually assembled by unofficial groups, would point up the problems requiring research. Research experts in State and

national agencies would then prepare material which would be used as study guides by lay groups, to be interpreted and implemented in the light of their own local situations.

In a search for facts pertaining to children, supervision should be in the hands of a professional research staff rather than of isolated groups working in various fields.

Specifics instead of general goals should be the aim in fact finding so that the goals may be more possible of achievement. Also, specific guides are needed in order to provide yardsticks.

It is recommended that fact finding be a fundamental function of a State-wide council, committee, or commission of official and voluntary organizations and agencies that serves children. These functions are defined in "State and Community Planning for Children and Youth," Children's Bureau Publication 312 (p. 7) as:

"Successful planning in any field involves collection and interpretation of facts concerning needs to be met, services available, and the utilization of these services by those for whom they are designed. This requires adequate research. Such research should be carried on, whenever possible, by the departments or agencies of the State government responsible for providing services in the fields of health, education, social welfare, employment, and related services. It should be the responsibility of the council on children and youth to utilize and correlate results of such research done by these and other agencies,

These earnest young people, with an adult consultant, are discussing a community project.



both public and private; to encourage and promote the development of adequate research programs as an essential part of the work of these agencies; and to conduct such fact-finding activities of its own as may be necessary to supplement the information otherwise available."

Insofar as possible, personnel connected with studies of child health and welfare should be related to the State planning group.

It is recommended that the State chairman or a representative as designated by the Chairman of the American Academy of Pediatrics be a member of this State-wide group in order that the Academy's recent Study of Child Health Services be interpreted and used as widely as possible.

In order to help the States give guidance to local community groups it is urged that a research committee of the National Commission on Children and Youth, as proposed in the January 28-30 suggestions, be set up at once and that it disseminate information to the States as soon as possible.

It is recommended that data be organized so that it always relates to the child as a whole. This means that there should be some technique of clearing information between different professional and lay groups as well as between geographical units.

It is recommended that immediate emphasis be placed on the *utilization of services* as well as adequacy and availability of those services.

Each State should study its needs and put on at least one research demonstration which would put into effect the integration of various professional skills in the interest of the child in the family and community before the 1950 White House Conference.

It is suggested that the Federal Government conduct the research in certain areas where direct action for solution of a problem may be needed at the Federal level—where State action alone would not be effective, as in matters involving international migration, interstate migration, and adoptions involving placements across interstate or international boundaries and in this instance within States and on a Nation-wide basis.

Standards and guides needed for State and local action

In formulating principles and methods to be applied to the well-being of children and youth, it is well first to define a standard. (A standard is that which is set up and established by authority, custom, or general consent, as a model or example; criterion; test.)

It is agreed that "standard" applies to a wide range of concepts, from goals to rules and regulations. Standards serve to bring unity, stability, continuity, guidance, quality, evaluation, adequacy, and equity to any program.

1. Standards can be made and kept truly alive only if representatives of all related or allied professional agencies, as well as community groups and individuals, participate in evolving such standards.

2. Essential steps in developing standards through local acceptance and participation are: (a) Recognizing the problem and understanding the need (education); (b) assessing all the resources available or obtainable; (c) seeking outside guidance and assistance; (d) keeping the standards dynamic and flexible; (e) activating the standards through coordinating efforts of groups and agencies; (f) providing for specially trained personnel to promote public understanding of the problem and action to be taken.

In preparation for the 1950 White House Conference the representatives of each State should review existing standards, particularly those set up in various fields by previous White House Conferences, to see: (a) Whether they are now considered appropriate; (b) how much progress has really been made in accepting and using them at the State and local levels.

In line with the above the Children's Bureau should formulate a simple statement of the broad goals set out in the General Report of the White House Conference on Children in a Democracy (1940), appropriate for wide distribution.

Legislation to achieve action

Principles that should underlie the selection of legislative objectives for children and youth to be sought prior to 1950 are:

a. Legislation should provide author-

ization for services that contribute to the well-being of all children in such fields as public welfare, health, education, recreation, labor, and related fields, as well as services for children with special needs.

b. Authorization for services should be in comprehensive terms so as to permit the development of broad and flexible programs.

c. Provision should be made for constructive measures that will prevent the development of conditions harmful to children and youth, as well as for corrective measures needed to deal with such conditions.

To select legislative objectives to be sought, each State will need:

1. To secure information about (a) existing State laws and services affecting children and families and (b) standards available for evaluating existing laws and drafting new measures.

2. To obtain facts as a basis for judging to what extent a standard in a given field is applicable to the needs of children within the particular State.

3. To decide upon legislative proposals to be included in the immediate program and long-range legislative objectives.

4. To make full use of existing agencies and channels in planning for new and expanded services.

5. To consider legislation that will promote the development of cooperation and reciprocal agreements between States in services for children (with special reference to nonresidents).

It is recognized that *preparation for legislation* requires consultation between administrative officials and citizens' groups on needs to be met, as to whether legislation is the best means of attaining the ends sought, and on the type of measure that will be effective. *Drafting bills* requires technical service from experienced legal draftsmen. *Presentation to the legislature* should include enlisting the understanding and leadership of committee chairmen and other legislators in both houses and the active discussion and support of *citizens* in communities throughout the State.

In formulating its own legislative program, each State needs information about the laws of other States affecting children and youth and standards developed on the basis of Nation-wide

experience. It was recommended that the Children's Bureau have research personnel available to supply the States with:

(a) Information on existing State laws relating to children and the family.

(b) Standards to be used in reviewing the laws in each State and in preparing new legislation.

(c) Review service on bills being drafted for State legislative consideration.

Citizen participation to achieve action

Bringing many citizens into State planning, either as individuals or as members of organizations, though at times it may slow up the turning of the wheels of organization, has values that far outweigh the odds involved. All possible volunteer citizen organizations should be brought into State programs for children and youth.

Participation of citizens should be planned, coordinated, and active, not of an onlooker, receptive nature.

In local planning there is danger of rural areas' falling through the organizational sieve. Encouragement to rural people to develop their own leadership is advisable.

The problem of bringing in the inarticulate, unaffiliated minority groups presents a challenge. Various channels through which to reach these groups are suggested: The schools; neighborhood community councils; clubs; libraries; the block system of house-to-house approach used during the war. One of the surest ways to reach parents is through their children.

As one method of stimulating citizen participation in children's problems, governmental agencies may utilize organized instruments. In other words, governmental agencies themselves have responsibility in citizen participation. In particular, this responsibility includes making available information and resource material in this field for the use of citizen groups.

Such States fortunate enough to have both volunteer citizen organizations, such as citizen councils on children, and official, statutory children's commissions, should hesitate before merging the unofficial body with the official body. Some functions, it is suggested, might remain for the unofficial groups and each State should give serious consider-

ation to these functions before reaching a decision to merge or abandon them.

Before criticizing or opposing governmental bodies, citizens should first go to them with a request for their cooperation—a further invitation to citizen participation.

There is a place for the lay volunteer and for the trained person in children's and youth programs, and in the local communities, particularly, local conditions may determine that place. It is concluded that the local community can best be served by the "general practitioner" or all-around type of trained person rather than one highly specialized, who has a more appropriate place in metropolitan areas.

Professional groups are in the best position to lay down principles for good action for the guidance of citizen groups, and such principles should be unified and adapted to practical application in matters affecting children.

Surveys are a good way of arriving at citizen understanding of local problems, and, with certain reservations, provide a means of inviting citizen participation.

A sound program of public relations is essential in stimulating citizen participation.

Youth participation is a gradual process beginning with the preschool child in the family, and continuing through all relationships in the classroom and on the playground, with the gradual assuming of more responsibility in elementary and secondary school years.

Adults should make provision for the various kinds of experiences which prepare youth to participate adequately in affairs which concern them:

A child needs to understand that participation involves responsibility in accordance with his age and experience.

There must be recognition of a child's needs and rights in play and leisure-time experiences and in work, school, and other areas.

Education for home and family living must be provided in school.

Provision for services such as are provided in some guidance clinics should be made available for more children and youth, including services of psychiatrists, psychologists, social workers, and psychiatric social workers.

Many adults will need experience and

education which will prepare them to participate understandingly with youth.

The following are suggested:

Agencies such as the Office of Education and the Children's Bureau to promote the making of movies that will provide education without seeming to teach.

Radio to be utilized as a means of family participation.

More informal groups for parent education to demonstrate the nonauthoritarian fashion of discussion.

Parent education through the technique used in connection with nursery school and kindergarten to be given.

Opportunity to be provided for parents to have classes and informal education based on their interests in this area.

Teacher education to emphasize child growth and development, including teacher-pupil planning, recognition of the ability of youth to contribute to planning.

It is recommended: That youth participate in a planning body on a State basis inclusive of governmental agencies and voluntary organizations concerned with planning regarding children and youth, sponsored either by governmental organizations or voluntary organizations or by a combination of both.

That youth have a major role in community activities in which they have interest and experience and in which the chief roles are usually played by adults. Such activities include: Recreation; health; education, including citizenship; youth employment; various community services, such as surveys of community needs, safety, and opinion-poll studies.

That communities might consider the establishment of interorganizational youth councils, composed of young people elected by youth organizations, schools, churches, and so forth. The purpose of these councils would be to work with adult consultants in developing community projects on which adults and youth can unite their efforts. This experience would offer opportunity for youth to learn to represent others, give experience in dealing with community problems, and provide a spokesman group for the young people themselves.

That the Youth Division of the Na-

(Continued on page 190)

COMMITTEE REPORTS ON CARE FOR CONVALESCENT CHILDREN

ALL children at some time experience illness, but most of them return to health after a brief and uneventful convalescence. For thousands of children, however, recovery is a long-drawn-out process. These children generally benefit from supervised long-term care, which is generally called convalescent care. Such care is for the most part a modification of the plan of care and treatment given the child during his acute illness.

Convalescent care is usually planned in relation to a single illness. There are, however, children with chronic disabling conditions who respond to therapy after episodes of their disease. For such children, convalescent care must be planned periodically in order that they may, between illnesses, live a relatively normal life.

Any plan of convalescent care for the individual child must take into consideration the child's physical, mental, and social needs, if such a plan of care and management is to attain its full objectives.

Continuing medical care and other convalescent services may be offered to children in one of three environments: At home, in a foster home, or in a special institution or convalescent home.

Each of these environments has its special virtue for the individual child and should be used as a convalescent resource only after careful study of the medical and social needs of each child.

The convalescent plan should be developed by a team of professional workers skilled in evaluating the convalescent needs of children and in relating available convalescent resources to these needs. Such a team will ordinarily include the physician, the nurse, and the medical social worker.

The physician, who should be one trained and experienced in the care and management of children, should be in attendance at sufficient intervals to ensure good medical supervision. He may wish to consult the various medical specialists as occasion demands.

Besides the physician, nurse, and medical social workers, the child may need the services of other workers, such as nutritionists, teachers, and occupational and play therapists. It will be necessary to balance these services in order to gain for the child a satisfactory social adjustment and optimum physical gains during the convalescent period. Adolescent children with residual crippling receive additional help at this time if some analysis of their vocational interests is made and vocational guidance is offered to them.



One activity that convalescent homes for children consistently provide for is school instruction.

Whatever measures are necessary to help the child's recovery, convalescent care, to be successful, must be directed to the needs of the whole child. Not only must attention be given to every physiological factor that affects his growth and development, but he himself must be considered as a living, changing person, whose mind and body jointly

Excerpted from "Convalescent Care for Children," the report of a study authorized by the National Society for Crippled Children and Adults, and made by a committee including A. L. Van Horn, M. D., chairman; Edith M. Baker; Jewell Gaffney, R. N.; Harry H. Howett; Isabelle M. Jordan, R. N.; Elise H. Martens; Waldo E. Nelson, M. D.; and Allen F. Voshell, M. D. Kathleen Allen was director of the study.

share in his recovery and in the process of his growth.

Little has been known so far about the convalescent facilities and services for children available in the United States as a whole. The nearest approach to such knowledge is the directory compiled in 1942 by the National Society for Crippled Children and Adults.

In May 1944 the National Society initiated a country-wide study of convalescent care for children. This study was conducted by a committee representing the basic professional fields that serve children during convalescence.

The objectives of this study as set forth by the committee were: "To explore the physical, mental, and social needs of children during the convalescent period; to define the optimum standards which should govern the provisions for care; and to determine the

needs for the extension and improvement of convalescent facilities for the physically handicapped child in this country."

Questions for which the committee sought answers were: (1) What facilities and services are available to assist children recovering from illness toward establishment of optimum health? (2) How can adequate convalescent measures be made available for all children recovering from illness?

The committee sought information from several sources, as follows:

To get an indication of the needs of individual children for care during convalescence, the committee requested nine

hospitals serving children to state what recommendations they had made for each child discharged during a 31-day period. These hospitals were located in six cities: Seattle, Chicago, Louisville, New Orleans, Philadelphia, and Washington.

An increasing number of cities throughout the United States have a clearing unit for health and welfare agencies, called the council of social agencies. For judgment of the needs of city children for convalescent care, the committee turned to these councils. The councils were asked: (1) What convalescent services were available in their community? (2) What services needed to be supplied? (3) What, in the council's opinion, would be an adequate program for children in that community? Of 240 councils approached, only 61 furnished information. These 61 repre-

children in their respective States. Twenty-five States were represented in these answers.

The committee invited all the hundred-odd convalescent homes for children known to be operating in the United States to participate in the study. Three-quarters of these homes, located in 31 States in all regions of the country, cooperated by giving complete information on all phases of their operation. The information was provided through questionnaires and through personal interviews between the director of the study and the staffs of the homes. The data collected from these homes should be helpful to organizations planning to establish new convalescent homes or to improve the services given to children by homes already operating.

The discussions of the committee on

Convalescent services and facilities are provided for only a small fraction of children in the United States who need such care. Where convalescent services and facilities have been developed for some children, coverage is not in any instance sufficient for all diagnostic age or racial groups which may need convalescent care in any one community or State.

No instance was discovered by the study committee where State-wide or community-wide planning for the development of adequate convalescent services and facilities for children was under way.

Needs of the convalescent child were considered by only a few communities; these have developed programs to meet these needs. The selection of a convalescent facility for the child is not always made on the basis of his need, but is more often determined by the facility that is quickly available.

Children often travel long distances and remain away from their homes for long periods to obtain convalescent care not available near their homes.

Children also frequently remain in hospitals long beyond the time when they are ready for discharge, or they return to homes where convalescent regimens cannot be maintained for them, because no convalescent facilities appropriate to their needs have been provided.

Children's convalescent homes in general are not affiliated with medical centers or hospitals. This leads to isolated administrative policies which may be at variance with the best interest of the individual home.

The administration of convalescent homes has not been given serious consideration by professional and standardizing organizations concerned with the administration of other health and medical facilities.

Convalescent homes for children are rarely subject to effective licensing regulations under health or welfare authorities.

No curriculums for the training of administrators or personnel in convalescent homes have been established in relation to schools of hospital administration or other appropriate educational programs. Conversely, convalescent homes do not as a rule offer staff training programs for student



A child in a good convalescent home is occupied with the normal activities of his age group.

sented cities with 23 percent of the population of the United States.

The largest purchasers of convalescent care for children are the official State agencies that administer services for crippled children. Since these services are largely given in rural regions, the committee asked for information about convalescent care given to rural children and also about the children unable to get such care. Thirty-eight States reported this information.

State crippled children's societies were also asked for opinions concerning the problems of convalescent care for

convalescent care for children have been focused on the needs of children during the convalescent period, the adequacy of existing facilities and service for meeting these needs and the definition of principles which should be considered in future planning in the field. Certain conclusions of the committee follow:

What was learned from the study

Relatively little information is available based on scientific studies in regard to the physiological and emotional aspects of convalescent care for children.

groups from related professional fields.

There is no uniformity of personnel requirements among convalescent homes for children.

Needs of children which relate to growth, development, and mental health are not universally recognized by personnel who deal with children in convalescent homes.

Although all convalescent homes for children maintain school and activity programs, such programs are not always in keeping with progressive methods of modern education.

A minority of homes make allowance for the staff to live outside the home.

Foster homes for the placement of convalescent children who particularly need this type of care have not been developed in many areas of the country, although many child-welfare agencies accept an occasional convalescent child for care.

Child-care agencies that specialize in foster-home placement of convalescent children are currently hampered in their objective through inability to obtain enough foster homes. Convalescent services are not available in many parts of the country to children who convalesce in their own homes.

Where nursing and other recovery services are available in the child's community, they are not always coordinated to his best advantage.

Home teachers for convalescent children are provided by boards of education in some urban communities but for the most part are unavailable to rural areas.

Housekeeping aides to assist the family during the child's convalescent period are now provided by a negligible number of urban communities.

Convalescent homes seldom have medical social workers as staff members.

What the committee recommends

The Committee on Convalescent Care for Children recommends:

1. That councils of social agencies and other community organization groups emphasize the needs of convalescent children along with planning for all other children within their community.

2. That area studies be made of the needs of convalescent children to determine what groups of sick children lack convalescent care and to what extent

the community should establish provisions for such care.

3. That standard-setting groups in the medical care and hospital fields include in their deliberations the problem of the convalescent child, to the end that sections on convalescent care for children be set up within these groups.

4. That curriculums for the training of personnel to serve in convalescent homes be established at appropriate educational centers throughout the country.

5. That the importance of the convalescent period of illness be emphasized in the teaching of medical students and students in the basic fields which serve convalescent children.

6. That convalescent needs of children in any one community be considered in relation to the need of the child and that facilities be developed to meet need in all diagnostic groups without limitation because of age, race, or religion.

Should affiliate with hospitals

7. That convalescent homes which serve children affiliate themselves with children's hospitals or general hospitals, which preferably in turn are associated with medical schools and with teaching programs in the allied professional fields.

8. That convalescent homes for children integrate themselves more widely with other community endeavors and citizen groups.

9. That the building of convalescent homes not only provide for the medical services necessary during the convalescent period but for the educational and recreational needs of the children who will receive care in the individual institution.

10. That although it is recognized that adequate grounds are necessary, the convalescent home be placed near enough to the affiliated hospital to allow easy access to it by all supervising professional groups.

11. That convalescent homes for children seek to establish themselves on a broader financial basis, in order to establish more adequate treatment programs for children under care. As a means to more effective financing, it is recommended that convalescent homes develop sound cost accounting practice.

12. That the program in children's

convalescent homes be geared to the current thinking in regard to the medical, social, and mental hygiene needs of the convalescent children.

13. That all convalescent homes for children recognize the need of the professional staff for progressive development through the allowance of educational leaves and attendance at professional conferences, and that for all personnel there be staff-development programs, not only in their specific fields but in the general areas of child care and development.

14. That boards of convalescent homes recognize the desirability of staff members' living away from the home, with the appropriate financial compensation and alternate help to allow for such arrangements.

15. That more units for the foster-home placement of convalescent children be developed under child-welfare agencies in both urban and rural areas.

16. That such foster-home units for convalescent children include in their program: Research as to number of convalescent children appropriate to a foster family, cost of maintenance of convalescent child to the foster family, and methods of supervision of the convalescent child in the foster home in nutrition, education, recreation, and mental hygiene.

17. That more convalescent services be made available to children who convalesce at home, that is, public-health nursing, physical therapy, medical social service, nutrition, occupational and play therapy, housekeeping-aide service.

18. That communities correlate and give appropriate emphasis to recovery services offered to the convalescent child at home.

19. That State and National legislation, which provides for the education of exceptional children, including children convalescing in their own homes or in foster homes, receive support from all individuals and groups interested in convalescent children.

20. That individuals and groups interested in the health of children throughout the country support effective voluntary and governmental measures which provide medical care for sick children, including children during the convalescent period of illness.

Reprints available in about 5 weeks.

A Two-Year Job for States and Communities

(Continued from page 186)

tional Social Welfare Assembly be requested to assemble stories illustrating youth participation at the various age levels to be used as a working tool.

That adults who deal with children and youth in institutions, including correctional and other institutions for children away from their homes, be better qualified to carry out youth-adult planning in the institutional program.

That children and youth with handicaps have opportunity for participation to the limit of their capacity in regular community groups with other children and youth.

That broader and richer experiences be provided for all children in order that they may grow into more mature, self-disciplined participating citizens in a democracy. This experience should be provided in schools and in other settings in which children and youth are, including family and neighborhood groups, youth-serving organizations, churches, and so forth.

For immediate citizen action, it is recommended:

That the Children's Bureau, or other Federal agency, collect as a central reference source, the questionnaires and survey material many groups have used to study problems in their own communities and States. The purpose of this collection is to avoid duplication and waste of time for other communities wanting to start on the road to social action by way of self-study of their own conditions.

That national organizations prepare high-quality professional radio programs that can be used in communities for a sound public-relations program, and in addition that universities be encouraged to hold workshops on radio-program preparation so that we can be trained to make effective use of local radio outlets. The purpose of this is to improve the quality of radio-program material relating to children and youth.

That each and every citizen organization regard as an outstanding challenge the individual citizen who is not affiliated with any organization, to bring him into full participation not only as a citizen but as one concerned with these child problems which we all face.

IN THE NEWS

National Health Assembly Meets May 1-4

As we go to press the National Health Assembly, composed of more than 800 persons concerned with various phases of the Nation's health, is meeting in Washington.

The assembly has been called by Oscar R. Ewing, Federal Security Administrator, at the request of the President of the United States.

The President's Child Health Day Proclamation, published in this issue of *The Child*, is being followed through by the maternal and child-health section of the assembly.

For Work With Blind Children

Delta Gamma Fraternity has a \$1,000 annual fund, from which scholarship awards are available for preparation of persons intending to become: (1) Orthoptic technicians, (2) teachers of partially seeing children, or (3) specialists in work for blind preschool children. Anyone wishing to specialize in one of these fields may be eligible for assistance, the amount in each case to be determined by the particular need and costs involved. If you want to enroll for training in one of these fields, apply for a scholarship to Mrs. Richard P. Miller, 39 West Jefferson Road, Pittsford, N. Y.

Summer Courses

Institute of Child Welfare, University of Minnesota, Minneapolis 14, has a threefold program, which includes research in child development, the training of teachers, and State-wide services in the fields of parent education, family life, and child guidance. First term, June 14 to July 23; second term, July 26 to August 27.

Louisiana State University School of Social Welfare, Baton Rouge 3, is offering 3-week courses on services for children in foster care; supervision in social case work; trends in child welfare, public welfare, and social case work (June 4-25); and a 3-week work-

shop in social treatment of offenders (July 19-August 6).

Among the subjects of 9-week courses are: Juvenile delinquency, social services to children, and visiting teacher work (June 4-August 6).

Mills College, Oakland 13, Calif., offers a summer-session program in child development which will emphasize early childhood education, with opportunities for directed teaching in the nursery school, open to qualified students. General courses will cover all aspects of growth and development, physical growth, child psychology, family behavior, and child personality. The program is open to professional people as well as parents and other laymen (July 3 to August 14).

New York School of Social Work, Columbia University, New York 10, will hold three series of summer institutes for experienced social workers. Series I, June 21-July 2; Series II, July 12-23; Series III, July 26-August 6.

School of Social Work, University of Denver, Denver 10, Colo., provides graduate professional education in five specialties: Family case work, child welfare, social group work, psychiatric social work, and administration. Registration for summer quarter, 1948, June 18-19.

CALENDAR

May 24-29—General Federation of Women's Clubs. Annual convention. Portland, Oreg.

May 23-28—American Physiotherapy Association. Twenty-fifth annual meeting. Chicago, Ill.

May 24-26—National Congress of Parents and Teachers. Cleveland, Ohio.

May 31-June 4—National Organization for Public Health Nursing. Biennial nursing convention. Chicago, Ill.

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Page 179, Ladies' Home Journal.

Page 182, Whittier College, Whittier, Calif.

Page 184, Drake University, Des Moines, Iowa.

Pages 187 and 188, Southern Educational Film Production Service, for Virginia State Department of Health.

FOR YOUR BOOKSHELF

THE GROUP LIVING OF CHILDREN. Citizens' Committee on Children of New York City, Inc. 136 East Fifty-seventh Street, New York 22, N. Y. 1948. 25 pp.

"It is now generally accepted," says this excellent booklet, "that a certain amount of daytime group living away from home is beneficial even to the very young child, and that the needs of family and child demand planning for such opportunities on a permanent basis."

"Too often," the report goes on, "nursery schools, kindergartens, day-care centers, play schools, and after-school centers are still run on the simple, antiquated concept of 'keeping children off the street,' while they pay little attention to the needs of a growing and developing child, or to the standards of care. Moreover, many new facilities have been opened up haphazardly, without satisfactory facilities, constructive programs, adequate standards, or responsible supervision."

To help those who are eager to create new services or improve existing ones, the Citizens' Committee on Children has issued this simple statement of the needs of the child at different age levels and of the factors that contribute to good programs for children.

Having learned from experience that a child under 2 is not ready for the big step of entering group living away from home, the committee recommends that these little children should not be enrolled in a group. For children past 2 it suggests how the child can be helped to take his place in the group, how he can be eased into the new experience without the shock of too sudden change from home life. After discussing the human atmosphere of children's group life the pamphlet goes on to such tangibles as administration and operation, facilities, staffing, and program.

The section on the school-age child—6 to 13—was largely contributed by the Play Schools Association. "We must insist," this section says, "that the responsibility of the school to its children and to the community it serves does not end at 3 p. m. and that extended services, depending on needs, be established to enrich and reinforce school programs."

A comprehensive list is given of play equipment and other equipment, both indoor and outdoor, for children of pre-school age, of those 6 to 8 years, and of those 9 to 12.

I. Evelyn Smith

A MESSAGE TO PARENTS. 1948. National Foundation for Infantile Paralysis, 120 Broadway, New York 5, N. Y. Publication No. 51. March 1948. 6 pp.

The National Foundation is for the second year distributing a folder of information on infantile paralysis to pupils in public, private, and parochial schools.

Infantile paralysis, says this little folder, does not break out often, but when it comes, it is important to know what it is, what to do about it, and where to turn for help. The disease attacks few people, the folder continues; 20 cases per 100,000 population usually is considered an epidemic. Half of all those who get the disease recover without crippling. Another fourth, with good care, recover with slight permanent crippling. Deformities may be prevented and crippling lessened by prompt, complete, and sometimes prolonged medical care.

The folder lists precautions to be taken if infantile paralysis comes to a community and tells what the National Foundation will do to help patients.

BABY'S DAILY TIME CARDS. Federal Security Agency, Social Security Administration, Children's Bureau. Washington. Revised 1947. 10 pp. Single copies free.

For a mother wanting a guide in planning her day-by-day care of her baby, this set of five cards, planned to be hung on the wall, can be an ever-present help.

One card gives pointers on taking care of the baby during his first 4 months. The others do the same for various ages up to a year.

The front of each card gives a suggested daily schedule, with hints on feeding, sleep, and play. The back of the card discusses foods and other things referred to on the front. The schedules are only suggested; they are not necessarily the best for all babies, nor the most convenient for their mothers. Spaces are provided on each card so that every mother can write in the time she finds best for the baby's bath, or for any other item in his schedule. She can also change her plan from time to time, to meet the changing needs of her baby.

The cards make it clear that the mother should not worry if something upsets her plan now and then—that there is nothing sacred about a schedule.

Panel Reports of Delinquency Conference Now Available

The panel reports of the National Conference on Prevention and Control of Juvenile Delinquency, which was held at Washington, November 1946, heretofore available only in mimeographed form, in limited quantities, have now been printed. They are for sale by the Superintendent of Documents, Government Printing Office, Washington 25, D. C.

The reports can be bought individually or as a group of 18. Special rates are provided for quantity orders of any report. The prices of single copies are as follows:

No. 1, Community Coordination, 15 cents; No. 2, General Recommendations for State and Community Action, 10 cents; No. 3, Juvenile Court Laws, 15 cents; No. 4, Juvenile Court Administration, 10 cents; No. 5, Juvenile Detention, 15 cents; No. 6, Institutional Treatment of Delinquent Juveniles, 20 cents; No. 7, Role of Police, 15 cents; No. 8, Housing and Juvenile Delinquency, 15 cents; No. 9, Recreation for Youth, 25 cents; No. 10, Mental Health and Child Guidance Clinics, 10 cents; No. 11, Youth Participation, 10 cents; No. 12, Citizen Participation, 15 cents; No. 13, Case Work-Group Work, 15 cents; No. 14, Church Responsibilities, 15 cents; No. 15, School and Teacher Responsibilities, 15 cents; No. 16, Home Responsibility, 15 cents; No. 17, Rural Aspects, 25 cents; No. 18, Statistics, 15 cents.

THE ROAD TO GOOD NUTRITION, by Lydia J. Roberts in collaboration with members of the Children's Bureau staff. Federal Security Agency, Social Security Administration, U. S. Children's Bureau Publication 270. Washington. Revised 1947. 51 pp. Single copies free.

This is a second revision of a bulletin first issued in 1942. It is intended to enable persons responsible for the health of children to become better acquainted with the child's nutritional needs at various stages of life and with methods of dealing with such needs.

"May Day has a long and pleasant tradition among all English-speaking children. It might well be chosen by their elders as a day which should be not only a festival but also year by year a celebration of some increase in the common store of practical wisdom with which the young life of the Nation is guarded by each community."

Julia C. Lathrop, 1916.

CHILD HEALTH DAY, 1948

BY THE PRESIDENT OF THE UNITED STATES OF AMERICA

A Proclamation

WHEREAS the Congress, by a joint resolution of May 18, 1928 (45 Stat. 617), authorized and requested the President to issue annually a proclamation setting apart May 1 as Child Health Day; and

WHEREAS the potential strength and future greatness of this Nation depend in large measure upon its children; and

WHEREAS the protection of the health of young Americans will help to assure the continued physical welfare of our people:

NOW, THEREFORE, I, HARRY S. TRUMAN, President of the United States of America, do hereby designate May 1, 1948, as Child Health Day; and I invite all parents, doctors, nurses, teachers, and all others who are interested in child welfare to cooperate in a Nation-wide effort, beginning on that day, to improve the health of children of school age.

I recommend as a first step that practical plans be developed to obtain thorough medical and dental examinations and treatment if necessary for every child entering school for the first time in the fall of 1948, to the end that all correctible defects found in the health of these children shall have been removed or placed under treatment by the close of the school year.

In order to give impetus to this effort, I request the National Health Assembly, meeting by invitation of the

Federal Security Administrator in Washington from May 1 to 4, to give special consideration to the health needs of children of school age.

IN WITNESS WHEREOF, I have hereunto set my hand and caused the Seal of the United States of America to be affixed.

DONE at the City of Washington this sixteenth day of April in the year of our Lord nineteen hundred and forty-eight, and of the Independence of the United States of America the one hundred and seventy-second.



Harry S. Truman

By the President:

Robert H. Smith

Acting Secretary of State.

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FEDERAL SECURITY AGENCY
SOCIAL SECURITY ADMINISTRATION

CHILDREN'S BUREAU
Katharine F. Lenroot, Chief

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